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Atty Docket No: 46354.010300

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

KEECH, Winston Donald

:

Group Art Unit: 2136

Serial No.: 09/915,271

:

Examiner: CERVETTI, David G.

Filed: July 27, 2001

For: Systems and Methods for Identity Verification for Secure Transactions

AMENDMENT TRANSMITTAL

MAIL STOP AMENDMENT
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

1. Transmitted herewith is a Response Under 37 C.F.R. §1.111 in response to the outstanding non-final Office Action mailed on January 27, 2005, in the above-referenced application.

2. Additional papers enclosed:

- Drawings: Formal (Corrections) (3 Replacement Sheets, Figs. 2, 4 and 22)
- Supplemental Information Disclosure Statement (PTO Form 1449)
- Submission of "Sequence Listing." Computer readable copy and/or amendment pertaining thereto for biotechnology invention containing nucleotide and/or amino acid sequence.
- Change Of Correspondence Address : 07/28/2005 SZENDIE1 00000106 500653 09915271
- Other: Substitute Oath/Declaration : 01 FC:2253 510.00 DA

3. EXTENSION OF TIME

The proceedings herein are for a patent application and the provisions of 37 C.F.R. §1.136(a) apply.

- Applicant believes that no extension of time is required. However, this conditional petition is being made to provide for the possibility that Applicant has inadvertently overlooked the need for a petition and fee for extension of time.
- Applicant petitions for an extension of time, the fees for which are set out in 37 C.F.R. § 1.17(a)-(d), for the total number of months checked below:

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Total Months <u>Requested</u>	Fee for <u>Extension</u>	Fee for Small <u>Entity</u>
[] one month	\$120.00	\$ 60.00
[] two months	\$450.00	\$225.00
[X] three months	\$1,020.00	\$510.00
[] four months	\$1,590.00	\$795.00

- Extension of time fee due with this request: \$510.00.
- If an extension of time is required, please consider this a Petition therefor.
- An extension for ___ months has already been secured and the fee paid therefor of \$___ is deduced from the total fee due for the total months of extension now requested.

4. Fee Calculation

CLAIMS AS AMENDED						
	Claims Remaining After Amendment		Highest No. Previously Paid	Present Extra	AT Rate Of	Total Fees
Total Claims	24	Minus	32	0	x \$50.00 each =	+\$ 00.00
Independent Claims	2	Minus	4	0	x \$200.00 each =	+\$ 00.00
First presentation of multiple dependent claim(s)					\$ 360.00	+\$ 00.00
SUB-TOTAL =						\$ 00.00
TOTAL FEE =						\$ 00.00

5. Fee Payment

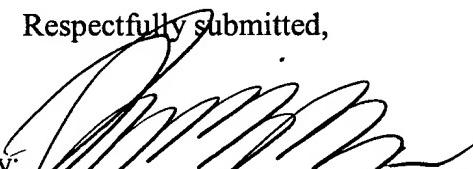
- No Fee is to be paid at this time.
- A check for \$00.00 to cover the extension fees is enclosed.

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The Commissioner is hereby authorized to charge the \$510.00 extension of time fee to Deposit Account No. **50-0653**.

The Commissioner is also hereby authorized to charge any additional fees associated with this paper, or credit any overpayment to **Deposit Account No. 50-0653**.

Respectfully submitted,

By: 
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Date: July 27, 2005

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REK:prm